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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)
YAMAZAKI et al.) Art Unit: 2186
Application Number: 10/812,893)
Filed: March 31, 2004)
For: DISK ARRAY APPARATUS AND DISK ARRAY)
APPARATUS CONTROLLING METHOD)
ATTORNEY DOCKET NO. ASAM.0118)

**Honorable Assistant Commissioner
for Patents
Washington, D.C. 20231**

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	20	20	(Over 20)	x \$50	0
Independent Claims	3	3	(Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x ½	
				TOTAL	0.00

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Preliminary Amendment
(with Claim Amendments) | <input checked="" type="checkbox"/> Petition to Make Special under 37 CFR §1.102(d) for Accelerated Examination |
| <input type="checkbox"/> Substitute Specification | <input checked="" type="checkbox"/> Statements & Pre-exam search report with References |
| <input type="checkbox"/> Assignment | <input checked="" type="checkbox"/> Information Disclosure Statement with references |
| <input type="checkbox"/> Letter to Draftsperson | |
| <input type="checkbox"/> Terminal Disclaimer | |

- Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- A check in the amount of **\$130.00** to cover the petition fee is enclosed.
- The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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